

POSITION	ID NO.	DATE
CLASSIFIER	21	12/8/93
EXAMINER	434	12/11/93
TYPIST	335	12/15/93
VERIFIER	434	12/15/93
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

INDEX OF CLAIMS

Claim	Date
Final	
Original	
1	9/24/93
2	2/23/94
3	4/11/95
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Claim	Date
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